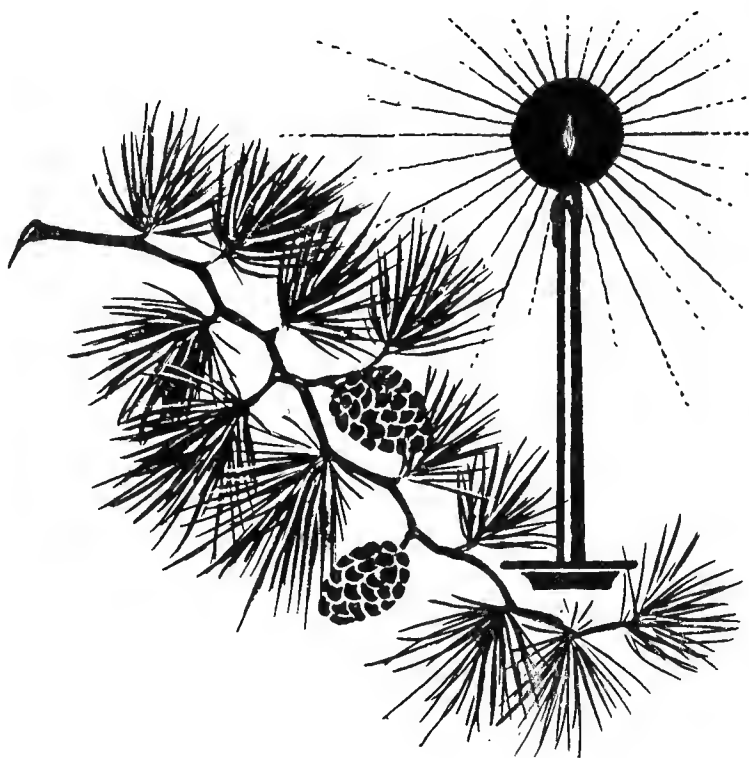


Season's Greetings



BULLETIN

of the
MAHONING COUNTY MEDICAL SOCIETY

Youngstown • Ohio

December • 1959

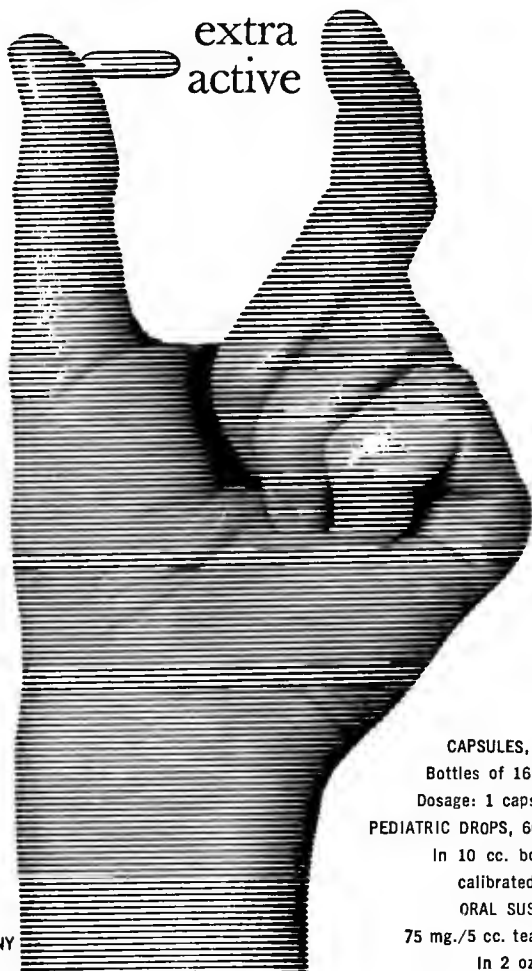
Vol. XXIX • No. 12

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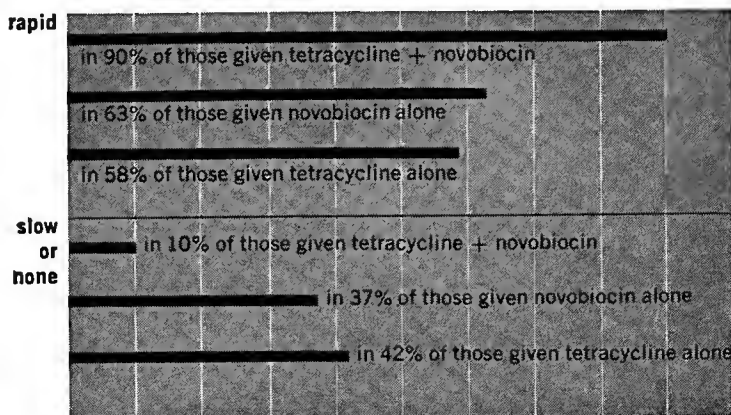
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7:00 Cocktail Hour

8:00 Medical Service Foundation Meeting

8:00 Mahoning County Medical Society Meeting

Film: I Am a Doctor

Election of Officers

Free Buffet Dinner

Dinner reservations must be made by Friday, December 11.

Send your reservation to:

Mahoning County Medical Society

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1005 Belmont Ave.

Youngstown 4, Ohio



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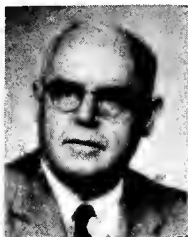
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A. K. PHILLIPS, Secy. 1005 Belmont Avenue C. W. STERTZBACH, Treas. 3610 Market Street L. O. GREGG, Editor Dollar Bank Building

Council

Delegates

Alt. Delegates

H. P. McGREGOR	G. E. DeCICCO	P. J. MAHAR (1959)	C. C. WALES
S. W. ONDASH	P. J. MAHAR	H. P. McGREGOR (1960)	J. J. McDONOUGH
M. S. ROSENBLUM	C. E. PICHETTE	G. E. DeCICCO (1961)	R. R. FISHER
H. J. REESE	F. A. RESCH	A. RANDELL (1962)	S. W. ONDASH

Representative to the Associated Hospital Service: J. M. RANZ

Executive Secretary: H. C. REMPEL, JR.

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Our President Speaks



Your president wishes to thank all the members who have worked hard during the past year for the advancement of our society. Our committee chairmen were unusually active. I am proud of our executive secretary Mr. Rempes, for his tactfulness and cooperation.

I am thankful to our local communications media for their understanding of our problems. Station WKBN has been most helpful this year.

Drs. Schreiber, Clifford, Kiskaddon, McGregor, Randell, and Shensa have made notable contributions during the year.

I urge your cooperation to the new president, Dr. Schlecht, who is facing critical problems. He will need every member's help. Please attend meetings where decisions are made.

Thus another year ends.

My wish for you is a Merry Christmas and a Happy New Year.

M. W. Neidus, M.D.
President

BULLETIN of the Mahoning County Medical Society

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The opinions and conclusions expressed herein do not necessarily represent the views of the Editorial Staff or the official views of the Mahoning County Medical Society.

Volume 29**December, 1959****Number 12**

Published for and by the Members of the Mahoning County Medical Society

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James L. Smeltzer, M.D.
Bernard Taylor, M.D.
Kurt J. Wegner, M.D.
Samuel Zlotnick, M.D.

EDITORIAL**END OF THE YEAR**

This issue of the *Bulletin* will be my last one as editor. I would like to take this opportunity to thank the rest of the staff and other contributors for their cooperation and efforts in making the *Bulletin* possible. I would like to express my appreciation to Mr. Howard Rempes who did most of the work and very well I may add.

We are approaching a new year and I would like to wish each of you and your families the best for 1960.

I feel we have a lot to look forward to, some things good and perhaps some things not so good. Medicine is advancing rapidly in all fields helping our patients which is good. Social groups are trying to tell us the best way to practice medicine and that is not so good. I am sure with a little effort we will all keep abreast of the new advances which are continuously taking place. But, to be able to keep up and resist these social changes will be much more difficult. We will have to be well organized from the local to the national level in order to be able to combat this trend. We must come up with constructive plans to give our people the best possible care under a free system of medicine.

We will have to be ever alert to its existence and progress and ready at all times to fight it and not stand idly by and watch these changes take place. I feel sure that we will.

—L. O. Gregg, M.D.

Editor

EXECUTIVE SECRETARY'S REPORT

In November, at Congress Lake Country Club near Canton, a meeting took place that probably would have been unheard of twenty years ago. The press and the doctors got together, and, as one news reporter put it, "the press found out that doctors were human beings."

The occasion was one in a series of dinners given by the Ohio State Medical Association for the press and radio people in each of the districts. At this Sixth District meeting, attended by more than sixty persons, every reporter and radio-TV representative was given the chance to stand and speak. In a very friendly atmosphere, they voiced their likes and dislikes as to how medical news was handled.

Dr. Frank H. Mayfield, President of the Ohio State Medical Association, spoke for the medical profession, and acted as master of ceremonies. He summarized the discussion by urging doctors to cooperate with news gathering agencies and to give them information willingly, except in the instances where disclosure of certain facts would violate the traditional doctor-patient confidential relationship.

The Mahoning County Medical Society was represented at the meeting by President M. W. Neidus, President-Elect F. G. Schlecht, and Treasurer C. W. Stertzbach along with the executive secretary. Others in attendance included officers from the six counties of the Sixth District, the district councilor, Dr. R. E. Tschantz, and Mr. Charles S. Nelson, Mr. George H. Saville, Mr. Charles W. Edgar, and Mr. Hart F. Page of the Ohio Medical Association staff.

—Howard Rempes
Executive Secretary

NOMINEES FOR 1960

The list of those nominated at the November meeting is as follows:

President-elect: A. K. Phillips
Secretary: C. E. Pichette
Treasurer: C. W. Stertzbach
1963 Delegate: P. J. Mahar

Council (2 year term):

G. E. DeCicco
P. J. Mahar
F. A. Resch
R. J. Scheetz

Alternate Delegates

R. R. Fisher
J. J. McDonough
S. W. Ondash
C. C. Wales

Further nominations may be made from the floor at the Dec. 15 election. Officers and members of council previously elected and therefore not to be voted upon at the coming election are:

President: F. G. Schlecht

Council (1 year term)

H. P. McGregor
S. W. Ondash
H. J. Reese
M. S. Rosenblum

1960 Delegate: H. P. McGregor

1961 Delegate: G. E. DeCicco

1962 Delegate: Asher Randell

WHAT'S AHEAD FOR THE TELEPHONE INDUSTRY?



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OPPORTUNITY FOR OUR SENIOR CITIZENS

As chairman of the "Committee on Aging" of the Mahoning County Medical Society, I have been reading all available material pertinent to this subject, and have recently attended the Regional Conference on Aging with our president, Dr. Neidus, and our executive secretary, Mr. Rempes. The following is a summary of these ideas as they concern our own community.

A few national statistics will quickly establish perspective. On the national level, we are talking about a group of 15.4 million people over 65 years of age. At present, 4 million of these are unemployed, 9 million are on O.A.S.I. (Old Age Survivor's Insurance), 2 million receive government pension, 2.5 million have some public assistance, and 1.25 million have private income. The main source of assets (70%) rests in home ownership, 80% of which are mortgage free. Those over 65 years of age have the largest percentage of liquid assets, 20% having over \$5,000, in contrast to 10% having over \$5,000 in all other age groups. The aged widow has the lowest income. Her national average is \$800 per year in contrast to males over 65 who average \$2,100 a year. As progressively more people increase their O.A.S.I. beneficiaries this condition will be improved. The doubt in my mind is whether or not this increase will keep up with the inflationary trend which we have accepted as a national pattern. Dr. Rita Campbell who is Consulting Economist of the American Enterprise Associations, Inc., states that the wealthy group care for themselves and that the indigent are cared for by charities, but that the "middle group" is the one having the greatest problem financially. If one of this group has a job, he averages \$124 less per year than his 20 year old counterpart, but has less obligations since his children are self dependent. The retired Senior Citizen can buy insurance only in proportion to the emphasis which he puts on that need, in contrast to his other desires. The statistics show that health insurance is high among their choices.

Dr. Ethel Shanas, who is Senior Study Director, National Opinion Research Center, University of Chicago, stated that old people have a lot of disabilities but seldom consider themselves very sick. In a survey of illnesses prior to questioning, she found 17% who admitted illness during the preceding 4 months, only one-third of whom had consulted a doctor and only 1% of the total having been confined to bed for one day or more. She states that most older people accept their chronic disabilities and won't accept medical care unless stricken with an acute illness. Only one out of every sixteen questioned mentioned lack of money as a reason for not consulting an M.D. She has given us the hopeful conclusion that most people can expect to feel good at age seventy. It is obvious that the proportion of hypochondriasis will decrease as they are kept at maximum physical and mental activity.

At this point I would like to make the personal observation that we should avoid committing ourselves as a medical society to any set fee for service to the aged. The gift of time and interest is a personal thing between the patient and his physician and can only rightfully be measured by the donor, rather than a welfare agency. The physician frequently knows when members of a family should be helping him carry the load, and often is aware of the occasions when families put such care on the shoulders of agencies, when they really should be carrying a part of the cost. Our medical heritage is one of generosity, and I believe the majority of our doctors still practice this example. The case worker should work closely with the physician, stating what he has found and asking whether the physician's experience corresponds



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with his findings. We should get away from the principle of "we have taken over this case and will pay x dollars—will you cooperate". I suspect that closer cooperation can save our agencies much money. By the same token, we physicians can think in terms of the value of a dollar at the year of the patient's prime income in assessing our charges.

In Youngstown we have a number of agencies helping to provide care for the aged. There is the Division of the Aid for the Aged together with the Advisory Committee for the Aid for the Aged, The Health and Welfare Council Committee on Older Persons which has sponsored the newly approved medical Home Care Program and Housekeeping and Homemaking Services. The Golden Age Center is administered by the City Park and Recreation department and is now utilized by the Protestant, Catholic, Lutheran, and Jewish groups. We also have an Advisory Welfare Committee of the County Home. At the Ohio State Level is the Ohio Citizens Council on Aging.

It would seem that we are blessed with ample interest, but could benefit by over-all coordination. Authorities in this field repeatedly point out that we should not take the "adult status" from these folks by doing this job for them. Instead, we should launch them in the direction of providing that leadership for themselves. For example, an "Organization for Senior Citizens of Youngstown" might consist of one representative from each of the above mentioned groups and six of our active Senior Citizens, some of whom should be drawn from the Golden Age Center. It would undoubtedly be of advantage to have one member each from the Medical Society, The Legal Society, the Protestant, Catholic, and Jewish Church Groups, a C.P.A., and representatives from the newspaper and the City Planning Commission. The existing organizations would continue in their present capacities, and the new organization would coordinate the additional steps to be made so as to avoid repetitious efforts in Youngstown. As a Medical Society, I believe our purpose should merely be to set in motion this coordinated community effort to help the senior citizens realize their full potential, and then to confine our attentions to the medical aspects of their care. The Regional Meeting repeatedly pointed out that people must be taught to keep active both physically and mentally throughout all phases of life, and that those over 65 need added inducement in that direction. We need to supply them with "stress" in adequate doses so as to avoid the atrophy of disuse. Remember, this is a rich reservoir of manpower which can be used in its rightful status of patriarch. These people can be available for the asking for community projects, political campaigns, and even city government leadership when an obvious need arises. Oldsters on the farm did the farm chores and thus made their contribution to themselves and to society, but we create waste when we keep them on the side lines in our urban habitat.

The final phases of a reasonable plan should include use of the 1) home care plan, 2) further development of the Wick Park area as a Golden Age site, 3) establishment of a cooperative housing and recreational area near this center, 4) encouragement of religious, fraternal, service, and private organizations to supply nursing homes for the aged around Wick Park to compliment the two existing fine homes in that area. (The Presbyterian Home and St. Mary's Catholic Home), 5) to possibly encourage the development of a retirement hotel in the same area and 6) the continuation of all indigent care under the existing hospital authority with its associated home care program.

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It is agreed that the senior citizen is happiest in his own home and can most economically be cared for in this situation, when his own physical status and family compatability permit it. Most phsyicians have heard families make the statement that "Dad gets with his old cronies and they have a circus". This need for companionship can be answered in the Golden Age Center. Nourishing noon meals at minimum cost could be supervised at such a center thus contributing to the general nourishment of the oldsters—especially the ones who live alone. Those in the middle group who have inadequate or untenable living situations can best be cared for by drawing on the old "College Commons Club" plan in which one person earns part of his keep by washing dishes, others by preparing food, others by serving, others by running an elevator, and still others by using past skills in directing a craft shop (woodwork, silver, or metal work, leather work, weaving and sewing), or the guidance of a branch library for the Golden Age Center. This approach provides an opportunity for the "middle group" to partially help themselves rather than to place them in a home in which they can quietly deteriorate. The pride which each can earn in his day-to-day relationship with others, will provide far more than the small amount of money he will earn toward his own maintenance. All people are happiest if they accept the basic philosophy that a person earns his place of respect in life by virtue of his day to day conduct and contribution, in contrast to the idea that he has earned respect through past deeds and now has nothing to do but reap unending rewards. The many group social activities such as cards, checkers, chess, vocal and instrumental music can be balanced by the availability of cultural contributions (lectures, concerts at nearby Stambaugh Auditorium) and by the encouragement of regular exercise (walking, shuffleboard, etc.) which is important to this age and too often neglected.

One answer to setting such a center in motion was given at our regional conference when it was explained that F.H.A. loans are recently available up to 90% of the final cost of any part of such a project, providing it is backed by a responsible non-profit organization. This would make it possible for service clubs, churches, etc., to each establish some phase of this integrated plan around a center such as Wick Park where the existing facilities are already established (these include a good variety of churches, a park, Stambaugh Auditorium, and a Golden Age Center). The full time occupants of such facilities could be estimated to be 10-20% of our senior citizens who can't or should not live independently. Having established a good overall plan in a definite center, the individual facets could be unfolded little by little as funds are available. At present, it seems logical that a service club could establish the "commons club" center which would provide the "hard working core" in a building housing the cooperative workers, as well as the cafeteria. Adjacent to this building one might visualize a building devoted to crafts, possibly sponsored by our local labor groups, and on the other side of the commons club possibly a building providing recreation and a branch library sponsored by such a group as the Junior League. It is a personal opinion that nursing homes around this area would be best administered by church groups such as the Lutherans, the Episcopalians, the Methodists, the Baptists, or by the Masons and Elks, etc. However, private nursing homes might be encouraged to invest in the general area to complement the broad needs of this plan.

It has been observed that existing organizations do not go along with any general plan unless they can maintain their own identity. I believe this is to advantage in the ultimate success of such a venture, and feasible



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for each of the groups mentioned through the use of the F.H.A. help. One can readily see the necessity for a guiding group so as to best integrate the overall plan into a well coordinated result. I am sure that such a center could prove to be a real clearing house for a short notice baby sitter, a part-time homemaker, or a quick replacement in an office, shop, or industrial plant. In Cleveland, a representative of the local employment office visits the Golden Age Center at appointed times because it has been found that these folks will not go down to the employment office but will make themselves available for many duties when interviewed at their own center. Such a center could serve as a nucleus around which the Golden Age Group would rotate, as well as provide a new level of interest in this group of our citizens.

This is a subject which is receiving increased attention throughout our country. Seeing our own community represented in the light of the existing national experience is merely one way to educate ourselves to the possibilities. I have no idea whether Youngstown is ready for, or would accept such a proposal. I suspect that it will take some well informed group such as our medical society to give it the necessary impetus if it is to be started before governmental agencies make it a "political plum". From all our observations to date, I think that Youngstown could find itself in the unique position of having first emphasized the "partial self help" approach for the "middle group" who need supplemental funds for their maintenance, and at the same time provide a program which helps the "senior citizen" become more responsible for an active social and cultural enjoyment in this phase of his life.

Committee on Aging

R. M. Kiskaddon, M.D., Chairman

PROCEEDINGS OF COUNCIL

November 9, 1959

The regular monthly meeting of the Council of the Mahoning County Medical Society was held on Monday, Nov. 9, 1959 at the office of Dr. M. W. Neidus, 318 Fifth Ave., Youngstown, Ohio.

The following physicians were present: M. W. Neidus, president, presiding, G. E. DeCicco, S. W. Ondash, A. K. Phillips, F. G. Schlecht, M. S. Rosenblum, C. W. Stertzbach, L. O. Gregg, A. A. Detesco, C. C. Wales, J. J. McDonough, H. P. McGregor, and H. J. Reese. Also attending was Dr. Arnoldus Goudsmit.

Meeting was called to order at 8:15 p.m. The minutes of the previous meeting were read and approved.

A letter was read from the Corydon-Palmer Dental Society concerning their exhibit at the Canfield Fair. The letter was turned over to Dr. McGregor, chairman of the Fair Committee.

A letter was read from Mr. G. H. Saville, Director of Public Relations for the Ohio State Medical Association, announcing that they were in receipt of the Social Security Resolution proposed by this society.

A letter was read from the Methodist Community Center requesting aid with physical examinations for children involved in their basketball program. The executive secretary was directed to contact physicians in that neighborhood for assistance.

A letter was read from B'nai B'rith announcing their "Man of the Year" award.

Dr. Neidus read a letter from Esther Hamilton calling attention to a story about a doctor in the Cleveland Plain Dealer, and asking the society to permit

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similar stories about our own fifty-year pin award doctors. The motion was made, seconded and duly passed that a note be sent to Miss Hamilton giving approval to such stories.

A letter was read from Mr. Warren P. Williamson, Jr., president and manager of WKBN Broadcasting Corporation, thanking the society for the resolution to Sid Davis, and pledging continuation of WKBN's news policy as carried out by Mr. Davis.

Dr. Goudsmit read a proposed budget for 1960. He explained that the dues for Ohio State Medical Association will be raised \$5.00 for the coming year, and suggested that the raise be absorbed by the Mahoning County Medical Society, so that there would be no change in the total billing of \$125.00 for A.M.A., O.S.M.A., and M.C.M.S. dues for 1960.

Following discussion, the motion was made, seconded, and duly passed that the Mahoning County Medical Society would pay \$5.00 of Ohio State dues per active member for 1960 only in order that the total billing would not exceed that of 1959.

Dr. DeCicco, reporting on a meeting of the Medical-Dental Bureau, introduced a resolution concerning *Bulletin* advertising. The motion was made, seconded, and duly passed that the following resolution be adopted:

WHEREAS, the members of the Council of the Mahoning County Medical Society, on March 2, 1934, recognized the need for a business office and appointed a temporary chairman, and secretary and a treasurer to organize the Medical-Dental Bureau, Inc., same having been accomplished and for 26 years the Bureau has operated for the benefit of its members.

WHEREAS, the members of the Mahoning County Medical Society and the Corydon-Palmer Dental Society own and operate the Medical-Dental Bureau, Inc.

BE IT RESOLVED that as long as the Medical-Dental Bureau, Inc., is owned and operated by members of the Mahoning County Medical Society and the Corydon-Palmer Dental Society, we the Mahoning County Medical Society will accept no competitive advertising in our monthly publication called the *BULLETIN*.

Dr. Neidus introduced discussion concerning a certificate from the Mahoning County Welfare Department calling for free medical examinations for welfare applicants. The matter was turned over to Dr. Stertzbach, chairman of the Indigent Relief Committee.

Dr. Neidus reported on the Nov. 4 meeting of the Sixth District at Congress Lake. Members of press and radio were guests at that meeting. Dr. Mayfield, president of the Ohio State Medical Association spoke at the meeting and asked for physician cooperation with news gathering agencies.

Dr. Schlecht, president-elect, brought up the possibility of changing the night and time of council meeting for next year.

Dr. Neidus reminded council that the Community Chest drive is on and that the Chest will need all possible help this year.

Dr. McDonough announced that certain other medical societies had introduced resolutions to protect the doctor who stops to administer aid to an emergency case and then is held liable for future developments. Following discussion, council urged Dr. McDonough to draw up a similar resolution for consideration by this society.

Bills were read. A motion was made, seconded, and duly passed to pay each one. A list of bills is attached to the minutes.

Meeting was adjourned.

—A. K. Phillips
Secretary

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References: 1. Cronk, G. A.; Naumann, D. E., and Casson, K.: *Antibiotics Annual 1957-1958*, New York, Medical Encyclopedia Inc., 1958, p. 397. 2. Childs, A. J.: *Brit. M. J.* 1:660 (Mar.) 1956. 3. Newcomer, V. D.; Wright, E. T., and Sternberg, T. H.: *Antibiotics Annual 1954-1955*, New York, Medical Encyclopedia Inc., 1955, p. 686. 4. Gimble, A. I.; Shea, J. G., and Katz, S.: *Antibiotics Annual 1955-1956*, New York, Medical Encyclopedia Inc., 1956, p. 676. 5. Stone, M. L., and Mersheimer, W. L.: *Antibiotics Annual 1955-1956*, New York, Medical Encyclopedia Inc., 1956, p. 862. 6. Campbell, E. A.; Prigot, A., and Dorsey, G. M.: *Antibiotic Med. & Clin. Ther.* 4:817 (Dec.) 1957.

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Left to right: Dr. E. H. Jones, Sr., Dr. R. G. Mossman, Dr. Robert E. Tschantz, who made the presentation, Dr. Walter B. Turner, and Dr. F. J. Bierkamp.

The presentation of 50-year service pins to four doctors drew warm-hearted applause from members attending the Nov. 17 dinner at the Elks Club.

Drs. F. J. Bierkamp, E. H. Jones, Sr., R. G. Mossman, and Walter B. Turner were honored for fifty years of service to humanity and the medical profession. In introducing the honored guests, Drs. A. Earl Brant, James L. Fisher and F. W. McNamara presented interesting and often humorous insight of the character and personal life of each of the doctors.

Here to make the pin presentation, was Dr. Robert E. Tschantz, Sixth District Councilor from Canton. This was his first visit to the Mahoning County Medical Society in the role of councilor. In addition to a pin, each of the four doctors received a certificate of commendation from the Ohio State Medical Association.

Following the dinner, the annual diabetes meeting was held, with Dr. James W. Craig, assistant professor of medicine at Western Reserve University School of Medicine as the speaker. The evening was concluded with nomination of officers for 1960.

NEWS

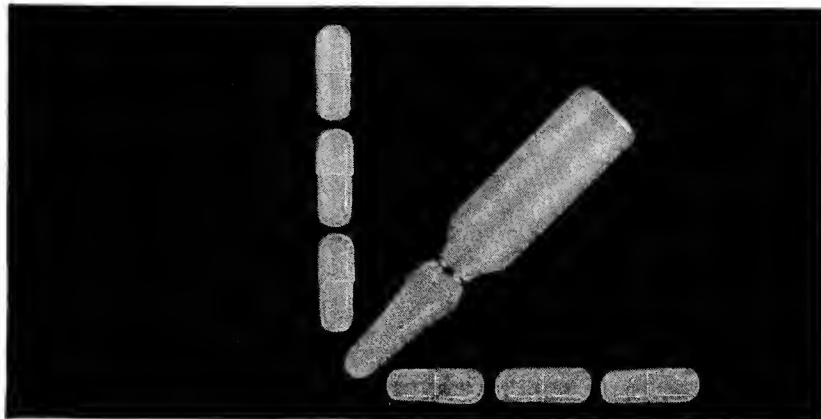
Dr. Sidney Franklin, President of the Mahoning Valley Chapter of the Council for Exceptional Children, was a delegate to the Seventh Annual Conference of the Ohio Federation of the Council for Exceptional Children, held in Springfield, Ohio, November 6th and 7th.

Dr. Morris S. Rosenblum addressed the local group on November 10th. His subject was "The Diabetic Child."

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FROM THE BULLETIN

Twenty Years Ago — December, 1939

In 1939 the Medical Society had a good year. The financial report showed a net profit of \$196.11 from the *Bulletin*. There was a profit of \$46.33 from the Annual Banquet, \$407.83 from Post Graduate Day and \$187.05 from the lecture course. The Society purchased \$1,500.00 of Government Bonds and ended the year with a surplus of \$12,484.00.

There were twelve regular meetings (eleven with speakers), six dinners with the speakers and a very successful Post-Graduate Day. Socially, the members enjoyed a Golf Party, an old fashioned picnic and clam bake and a dinner dance.

Speaking of attendance and interest in Society affairs, Editor Patrick summed it up in words which apply well today when he wrote, "The future of medical practice is in the hands of the medical profession. Your responsiveness to and handling of the changing conditions will determine whether medicine is to be a leading and constructive force in a changing society. You cannot ignore the situation. If you don't make it right someone else will. So get out to meetings, get on committees, acquaint yourself with the problems to be solved and give of your time and thought. You are the best educated of any group in the community of which you are a part. Why not put that education to work for yourself and the community?"

Annual dues were twenty dollars of which five went to the O.S.M.A.

Ten Years Ago — December, 1949

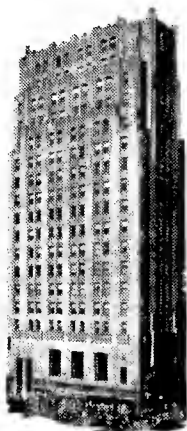
There were 240 active members, 2 Associate, 7 Intern, 11 non-resident and 10 Honorary.

It was the last year we had our own Post-Graduate Day. Since 1949 the 6th Councillor District has taken over Post-Graduate Day with meetings alternately in Canton, Akron, Warren and Youngstown. As everyone knows, they have become bigger and better than ever but not everyone knows that our Society started them.

Another change in the past ten years is in the character of Hospital Staff meetings. Those days Staff meetings were held once a month. Someone read a paper or a group gave a symposium, memorial resolutions were presented for departed members, some current business was transacted and everyone went home. Due to the regulations of the Joint Committee on Accreditation, Staff meetings now consist of committee reports and a critical appraisal of the work done in the hospital. Section meetings extend the appraisal to a more detailed study of deaths and procedures in the various departments. These sessions are informative but the only formal scientific programs are the clinical-pathological conferences and the Visiting Professor programs.

There is a hospital meeting every week and attendance is recorded because the Joint Committee requires eighty per cent of the Staff in attendance. That keeps the doctors busy attending hospital meetings which is good in improving our efficiency. That leaves the Medical Society meeting the only one that is purely voluntary.

Medical Society meetings now have to compete with very good programs in the hospitals. It is difficult to offer a scientific program with general appeal. A speaker on Diabetes may not attract the orthopedist, the dermatologist or the psychiatrist even though the disease affects every organ in the human body. Consequently, attendance is falling off. A recent meeting to consider changes in the Constitution had to be adjourned because there was not a quorum present.



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It is not a function of this column to deal with present problems but to record the past. Studying the development of the Medical Society as recorded in the *Bulletin* the writer feels a great pride in our achievements and wishes them to continue. He cannot help but say that active participation and loyalty to the Medical Society transcends interest in hospitals, lodges, churches or any other group.

Medicine is your life and the Medical Society is your union. If you do not support it, you will suffer.

—J. L. Fisher, M.D.

MEDICAL EDUCATION GIFTS URGED

Did you know that you can "earmark" a contribution for your Alma Mater when giving to the American Medical Education Foundation? You can so designate your gift and still send it through the AMEF, according to Dr. W. H. Evans, chairman of the AMEF committee for the medical society.

The 1959 campaign for funds for the Medical Education Foundation is still on and Dr. Evans urges every member of this society to make a contribution to help the financial plight of the medical schools of America.

Each local doctor has received an envelope from AMEF in which he can enclose his check. If any member has mislaid that envelope, he can still send his contribution by addressing it to: American Medical Education Foundation, 535 N. Dearborn St., Chicago 10, Ill.

SOCIAL NEWS YOUNGSTOWN HOSPITAL

I wonder how many of you are aware of the "Pill Rollers" Bowling League, made up of 30 doctor's wives. The competition is mighty keen for the trophies which will be presented next May.

One of the bowlers, Mrs. Caroline Resch has been laid up by recent bout of Hepatitis. She was pretty sick, but she is home now and convalescing. Speaking of convalescing, it is good to see Dr. Dick Middleton and Dr. William K. Allsop up and about again.

Doctor and Mrs. Ed Rizk attended the Army-Navy game in Philadelphia on Thanksgiving week-end. Dr. and Mrs. Robert Tornello spent a week-end in New York in November. Dr. and Mrs. Bryan Hutt spent a few days hunting in Bowling Green, Ohio (for Turkey?). Dr. and Mrs. James L. Fisher took a week-end trip to Washington D.C., and saw the Nation's Capitol thru the eyes of their grandchildren. They are the children of son James L. Fisher of Akron.

Dr. and Mrs. Joe Campolito came up with a boy after two girls. Little Joe was born October 22nd.

Dr. Andy Detesco opened his new office building, the Andvir Medical Center, with a series of Sunday cocktail parties. The office suite is strikingly and beautifully decorated by Mrs. Detesco. The other suites are occupied by Dr. Beal, Dr. Jack Costa, dentists, and Dr. Jim Patrick and Dr. Robert Tornello are sharing office space three days a week.

Dr Jack Schreiber held a meeting of the new *Bulletin* editors November 19th to discuss plans for the coming year. Jack is our new Editor, and you can be looking for some interesting new ideas in next years *Bulletin*.

Merry Christmas and Happy New Year! See you next year.

—R. R. Fisher, M.D.

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SOME ASPECTS OF SOCIALIZED MEDICINE

G. T. Hamilton, M.D., M.R.C.S.

It is impossible to write comprehensively about Socialized Medicine in a single brief article, and I shall therefore confine myself to those aspects of it which I find are not generally appreciated in the United States. If I spend more time on aspects of which I approve, it is because I have both heard and read nothing but ill of the system since coming over here, and I feel that this is in part due to ignorance and in part to an increasing fear that Socialized Medicine may one day exist in the United States. I am aware that most of the articles written from first hand knowledge of conditions in Great Britain are unfavorable, but it is a notorious trait of the British that they are ever ready to grumble at that of which they disapprove, while being lazy and reluctant to praise that which is good in their country. Whilst you have a good idea of what is wrong with British Medicine, we in England picture America as a Land of Milk and Honey as far as the practice of Medicine is concerned; I feel sure that many of my compatriots, could they also see American Medicine close to, would feel like myself that it too has some highly unsatisfactory features, and might see the tangible virtues of the British National Health Service more clearly. Having said this, I must hasten to add that I have the greatest admiration for American Medicine and fully realize the grave defects of Socialized Medicine. But one must be fair.

Certainly there is a large measure of discontent in Britain over the present status of Medical Practice. This is not so much over the concept of Socialized Medicine—which is generally regarded as having been inevitable in the first place and irrevocable now—as over the way in which certain parts of the National Health Service operate. In the field of General Practice it is salutary to recall that all was certainly not well in pre-N.H.S. days. Medicine was open to a very limited section of the population, to those in fact whose parents could afford the cost of the education. Progress in the field of General Practice was then frequently limited by the private means, or lack of such means, possessed by the individual. After qualification there was no obligation to serve an internship, and many fine men with limited means were forced to work for years under a Senior, often for an inadequate salary and in many cases carrying out the more thankless tasks of the Practice. Payment for services was carried out by what might crudely be termed soaking the rich and subsidizing the poor.

It is doubtful whether the standard of medical care was any higher than it is now. There were a few partnerships, professional jealousy was rife; there was often extreme reluctance to advise or accept second opinions, and there was a general professional Mystique which was in many cases quite out of proportion to the actual services rendered. The distribution of practitioners throughout the country was appalling. These may be strong words, but many of the above statements may be found expressed in an admirable book "The English Health Service: Its' Origins, Structure and Achievements" by Professor Eckstein of Harvard who spent two years in England studying the problem. I mention these points because of the frequency with which criticism is levied at British Medicine by people who have not the faintest idea of conditions in pre-N.H.S. days. Certainly there were many fine Doctors, but I doubt (and this is shared by many older Medical Men) whether the proportion was much higher than today. Now, as then, standards of practice depend far more on the individual than on the system and it is euphamistic to pretend otherwise.

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The chief fault of Socialized Medicine as applied to General Practice is that in order to make even a reasonable living, the Doctor must have far too many patients on his list; furthermore the system of payment per capita is discouraging and takes no account of the actual service rendered. On the other hand (and this view is echoed by Professor Eskstein) because of the ethics and traditions of British Medicine, the quality of the doctor's service depends very little on whether or not the patient pays a fee. At a time when British Medical Schools are more over-subscribed than ever before it is indeed difficult to make a case for financial reasons being a large factor in the consideration of Medicine as a career; there are many other careers in which it is vastly more simple to make more money than in Medicine. This may not be logical, but it is a fact. There is at present a Royal Commission considering terms of Service in the Medical Profession, and it is widely hoped that this will lead to higher capitation fees and smaller lists, or failing this some method of payment for services. If this comes about, I believe most Doctors would be fairly satisfied with their situation, even if they might not consider it ideal.

While on the subject of the size of lists, it is pertinent to observe that British Doctors do not carry out many of the more complex office procedures which are standard over here, these being done by the Hospitals. Few practitioners, for example, have E.K.G. or X-ray facilities. Furthermore, patients are not nearly as sophisticated in Medical matters as they are over here, nor are they generally so neurotic. The patient has complete freedom of choice over the practitioner he consults, and he simply goes to another Doctor if he is not satisfied. Excepting cases of Emergency. The Doctor has no moral or legal obligation to treat or accept a patient on his list.

It is perfectly legal for a N.H.S. Doctor to accept private patients, so that there is nothing but financial considerations to prevent people from becoming private patients. The Ministry of Health seems, in the words of Professor Eckstein "to have a decently limited view of its role in the service, and the sum total of official intervention in the actual clinical relationship is very small". Again, it is perfectly legal for a doctor to set up exclusively in Private practice. Though financially this is unfeasible in all but a very few cases. When all is said and done, however, there are many features about British General Practice which are profoundly unsatisfactory and it will need radical changes, which we all hope the Royal Commission will recommend, to improve it.

In the field of Hospital Medicine, the chief bogey is a lack of money, itself geared to the sorry state of our National Finances since the war. Fortunately the country is now enjoying considerable prosperity, and for the first time this year's fiscal plans for Medicine include a reasonable sum to be spent on Hospitals. Although the Hospital Service is far from perfect, most objective observers would agree that it is considerably better than in the days of private Medicine. Every hospital is staffed by Consultants, all of whom have the equivalent of board qualification in their specialties. Among the Residents there is almost always one similarly qualified man in each specialty, and often more than one. British Nursing is generally recognized as being the best in the World, and it is still very much of a vocation as well as a career. I feel that the standard of Hospital care is very high. Treatment is entirely objective, and generally accepted criteria for admission admirable—viz. the patient is too sick to be cared for at home, he needs some special treatment which he cannot receive outside a Hospital, or the diagnosis is not clear and the patient merits special investigation. In brief, there is a firm belief that Hospitals are places for the sick.

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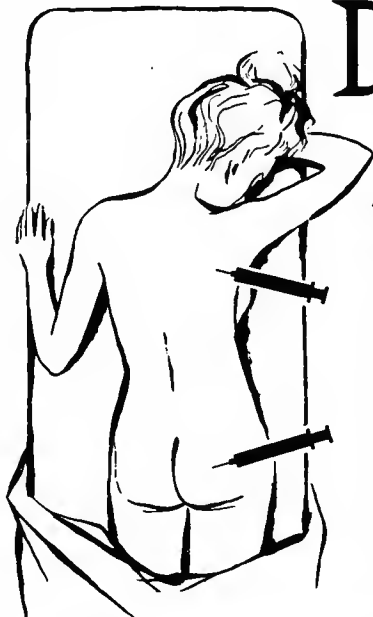
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The two major faults of Hospital Medicine are as follows. Since the war far more Doctors have been specializing: there is in general no shortage of Residents, but the number of Consultant posts, which carry a good salary and considerable prestige, has hardly increased at all. Consequently there are as many as 150 applications for certain choice jobs. This can hardly be attributed to Socialized Medicine, rather to a lack of expansion of Hospital Services. It is doubtful if such an expansion would have taken place even were Medicine still private. Secondly, there is almost complete divorce between the Hospitals and General Practice. This is recognized as the evil it undoubtedly is, and efforts are currently being made to bring the two closer together, although no British Practitioner would want to claim the right to dictate the treatment investigation of all his hospital patients. With the criteria named above, they feel that it is right and proper that the majority of the patients they send to hospital should have specialist care. This, I feel, is a safeguard to the patient, and one of the ways in which British Medicine is superior to American. In an American Private Hospital it is splendid to be treated by a good doctor, but highly dangerous in many cases to receive the attentions of a bad one. These latter exist over here as nearly as they do in my country, and the public is obviously as primitive over here in its methods of choosing its Doctors as is the case in England.

In conclusion, if socialized Medicine ever comes to America, I hope and believe that its form will be vastly different from that of the British N.H.S. However, certain features of British Socialized Medicine are praiseworthy and are all too seldom quoted. It is as important to appreciate these as it is to reject and take warning from its many bad points.

WOMAN'S AUXILIARY NEWS

On October 27th the Woman's Auxiliary to the Mahoning County Medical Society met at the Y.M.C.A. for a luncheon meeting with the members of the Woman's Auxiliary to the Mahoning County Bar Association as their guests. Mrs. Robert Weimer, vice-president of the Bar Auxiliary, in the absence of Mrs. John Resch, president, extended an invitation to the Medical Auxiliary to attend a tea at the Butler Art Gallery on November 18th.

A panel discussion on the "Juvenile Court" followed. A resume of the book, "Sins of their Father", by Dr. Pittwaggen was given by Mrs. E. M. Thomas; a report of the Detention Home was presented by Mrs. Craig Wales; and an explanation of the newly formed Mahoning County Citizen's Committee on Services for Delinquent Children and Youth was presented by Mrs. James Smeltzer. Auxiliary members voted a contribution to be given to the committee to aid in the financing of a survey of the Youngstown area. This survey will be conducted by the National Parole Board.

Program chairman for the meeting was Mrs. Craig Wales, assisted by Mrs. E. M. Thomas as co-chairman. Mrs. Robert Brown, Mrs. Rollis Miller, Mrs. Fred Schellhase and Mrs. James Smeltzer completed the program committee. Social chairman was Mrs. Myron Hanysh with Mrs. H. S. Banning as co-chairman. Mrs. Robert Jenkins and Mrs. S. W. Chiasson assisted.

On November 18th, a tea was held at the Butler Art Gallery by the Woman's Auxiliary to the Mahoning County Bar Association with members of the Medical Auxiliary as guests. The Playhouse presented a reading of the play "Sabrina".

November 28th will be the American Medical Education Foundation and Para-Medical Scholarship Fund Dance at Squaw Creek Country Club.

—Mrs. Paul E. Ruth, Publicity Chairman

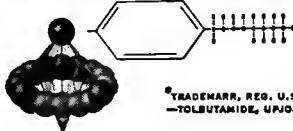
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THIRD PARTY MEDICAL CARE MEETING

One hundred physicians, including twenty out-of-town guests, attended the special meeting on third party medicine, held at the Elks Club, Tuesday, November 24.

Dr. R. V. Clifford, chairman of the committee to study third party medical care, presented the problem as it affects medicine locally. He then introduced Dr. Matthew Marshall of Pittsburgh, who is serving in an advisory capacity with county societies in steel communities. Dr. Marshall reviewed some of the long-range objectives of the United Steelworkers, as presented by representatives of that union at the June 24 Pittsburgh Conference.

Dr. Clifford spoke of the interest of his committee in the Medical Care Plan of the Academy of Medicine of Cleveland. He then called on Dr. Paul Schildt and Mr. Eugene Martin of Cleveland to discuss the plan. Mr. Martin, who represents Medical Mutual of Cleveland, answered questions.

Dr. R. E. Tschantz, Sixth District Councilor, called attention to a resolution concerning free choice of physician, which was made by the Cincinnati Academy of Medicine. He announced that there would be quarterly meetings of sixth district officers to discuss progress.

Dr. Neidus, in dismissing the meeting, reminded those present that the problem had to be solved at the local county level, and that our counties will be the first ones in Ohio to be confronted with United Steelworker demands.

Guests at the meeting included: COLUMBIANA COUNTY—Dr. W. A. Kolozsi, pres., Dr. R. J. McConnor, and Dr. Pritchard. PORTAGE COUNTY—Dr. C. C. Whitsett, pres., and Dr. Webb. STARK COUNTY—Dr. A. E. Boyles, Dr. A. R. Furnas, Jr., Dr. M. F. Lieber, Dr. D. Rummel, Dr. W. A. White, Jr., and Mr. J. H. Austin, Executive Secretary. SUMMIT COUNTY—Dr. Donald I. Minnig, pres., Dr. McCready, and Mr. Sidney Mountcastle, Executive Secretary. TRUMBULL COUNTY—Dr. Clyde Muter, president-elect, and Dr. John Schlecht.

HAPPY BIRTHDAY

Dec. 16

A. R. Dziadzka

Dec. 17

D. B. Brown

Dec. 19

L. P. Caccamo

S. R. Zoss

Dec. 21

C. S. Peabody

Dec. 23

D. E. Montgomery

A. E. Rappoport

Dec. 24

W. H. Bunn Sr.

J. L. Smeltzer

Dec. 25

W. H. Evans

W. L. Mermis

M. S. Zervos

R. D. Murray

Dec. 27

A. E. Brant

S. Epstein

W. E. Maine

Dec. 28

W. R. Smith

J. J. Sofranec

Dec. 31

J. M. Cavanaugh

Jan. 2

J. Colla

M. H. Steinberg

W. T. Martin

Jan. 3

J. K. Herald

R. H. Middleton

J. B. Stechschulte

S. R. Weiss

Jan. 5

L. H. Scharf

A. B. Sherf

Jan. 10

D. T. Yoder

Jan. 11

E. H. Young

Jan. 13

A. J. Brandt

Jan. 14

H. P. McGregor

J. M. Ranz

Jan. 15

W. H. Bunn Jr.

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"Ah Doctor, does it matter who writes the prescription?"



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Phenobarbital	8 mg. (⅙ gr.)

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DOCTORS STUDY NUCLEAR MEDICINE

For the first time in Mahoning Valley medicine, a basic course in nuclear medicine was provided at St. Elizabeth Hospital through cooperation with the Picker X ray Radio-Isotope Education Program. Area physicians undertook a 40 hour course in order that they might qualify for Atomic Energy Commission approval in handling of isotope material.

This particular program has been given in various cities throughout the country as a service of Picker X ray in order to prepare physicians for nuclear medicine in their home areas and has, to date, graduated approximately 150 men.

According to Mr. Alfred Mosier, Training Coordinator for the Picker Nuclear Medicine Program, the class of 15 was the largest, most interested group yet to receive instruction.

The class was attended by radiologists, internists, gynecologists and clinical pathologists from Beaver Falls, Pa., Greenville, Pa., Rochester, Pa., Youngstown Hospital Association and St. Elizabeth Hospital.

Mrs. Audrey Wegst, nuclear physicist from the University of Michigan, gave the formal sessions in basis physics. Dr. Raymond Scheetz, of the St. Elizabeth Hospital X ray Department, conducted the clinical section with the assistance of clinical material provided by Dr. B. I. Firestone and the Department of Internal Medicine.

The course prepares members of the various professions in basic nuclear physics and in the use of Radio-iodine for thyroid diagnosis. It also provides the foundation for further isotope work with minimal additional study.

The course ran from Nov. 2 to Nov. 6, and during this period, Sister Baptista, administrator, graciously provided the group with meals and frequent "coffee breaks" which was most appreciated by all in attendance.

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Dosage: One tablet taken one-half to one hour before each meal.*



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Following the written examination a dinner for the graduation class was held in the Mural Room, Friday, Nov. 6, and diplomas were presented by Dr. Raymond Scheetz.

—L. P. Caccamo, M.D.

AMA DUES EXEMPTION FOR OLDER DOCTORS

Any doctor, 70 years of age prior to January 1, 1960, is exempt from paying dues to the American Medical Association, but still will be carried on the AMA roster as a full member.

To claim this exemption, please phone the Mahoning County Medical Society office. If you have already paid this \$25.00 as part of your 1960 dues, phone immediately, and a refund will be made. If you have not yet paid your 1960 dues, and are eligible for the exemption, simply deduct it when you make out your check, and send in a note to that effect when you mail your check to the medical society office.

To become exempt from paying Mahoning County and Ohio State dues, a doctor must be retired from practice and apply for Honorary Membership.

AMA PUBLICATIONS

As a member of the American Medical Association, you are now receiving a new publication—at no extra charge. All members now get the AMA Journal as well as the specialty journal of their choice. This is in addition to the AMA News and Today's Health.

An AMA published volume, "Digest of Official Actions, 1846-1958" has been added to the bookshelf of the Mahoning County Medical Society office. Available for reference, this is a comprehensive record of everything done by the American Medical Association through its House of Delegates.

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- and the hope that you may enjoy a real Merry Christmas and a New Year of Peace and Prosperity.



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